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**TRANSMITTAL FORM**AUG 22 2006  
(to be used for correspondence after initial filing)

|                        |                          |
|------------------------|--------------------------|
| Application Number     | 10/619,834               |
| Filing Date            | July 15, 2003            |
| First Named Inventor   | Brian H. Silver          |
| Art Unit               | 3763                     |
| Examiner Name          | Catherine Serke Williams |
| Attorney Docket Number | 5297/181                 |

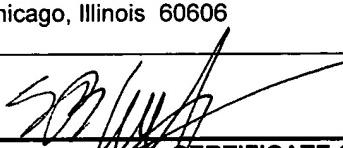
**ENCLOSURES (Check all that apply)**

|   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Postcard Receipt<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><input checked="" type="checkbox"/> Check for \$120<br>(1 mo. ext fee) |
| <input checked="" type="checkbox"/> Amendment/Reply<br><input checked="" type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)  | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-0930</u> . A duplicate copy of this sheet is enclosed.  |   |
| <input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

**CALCULATION OF FEE**

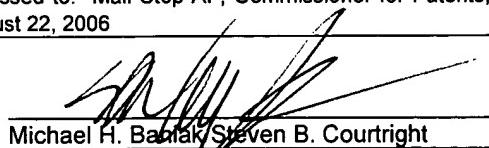
|   |                        | Small Entity                    |               | Large Entity    |           |
|---|------------------------|---------------------------------|---------------|-----------------|-----------|
|   | Claims After Amendment | Highest No. Previously Paid For | Present Extra | Rate            | Add'l Fee |
| Total                                     |                        | Minus                           | (20)          | x \$25=         | 0         |
| Indep.                                    |                        | Minus                           | (3)           | x \$100=        | 0         |
| First Presentation of Multiple Dep. Claim |                        |                                 |               | + \$180=        | ---       |
|   |                        |                                 |               | total add'l fee | \$ 0      |
|   |                        |                                 |               | or              |           |
|   |                        |                                 |               | Rate            | Add'l Fee |
|   |                        |                                 |               | x \$50=         |           |
|   |                        |                                 |               | x \$200=        |           |
|   |                        |                                 |               | + \$360=        |           |
|   |                        |                                 |               | total add'l fee | \$ 0      |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|                         |  |      |                 |
|-------------------------|--|------|-----------------|
| Firm or Individual name | Michael H. Baniak, Reg. No. 30,608<br>Steven B. Courtright, Reg. No. 40,966<br>Attorney/Agent for Applicants<br><br>BANIAK, PINE, AND GANNON<br>150 N. Wacker Drive, Suite 1200<br>Chicago, Illinois 60606 |      |                 |
| Signature               |   | Date | August 22, 2006 |

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, under Express Label No. EV83284770 US, on August 22, 2006.

|  |   |       |                 |
|--|---|-------|-----------------|
| Signature                              |  | Date: | August 22, 2006 |
| Michael H. Baniak Steven B. Courtright |   |       |                 |